

# Gaurdianship

## Check List

- Petition for Gaurdaian Completely Filled Out.
- Notarized Signatures
- Filing Fee \$30.00 or Motion to reduce/ waive filing fee.  
(DO NOT accept cash only Money order or Cashier Check)
- Obtain case number from the Court Clerks
- Serve the Other Parties
- File Affidavit of Service with the Court Clerks
- After 20- 30 Days of Filing Affidavit of Service, File Motion to Request Hearings by either party

## General Rules to Remember

1. Do Not Ask the Court Clerks For Legal Advice. Question that start with (**how and what**) are considered legal questions. Clerks can give you legal information; can tell you the processes or the code.
2. No Hearing will be scheduled without a request for a hearing by one of the parties. This will need to be in writing. The courts need a paper trail for your case.
3. All requests for hearing must be made by filing a motion with the court and specify what type of hearing is being requested and how long.
4. Anything you want to ask or request of the Courts it needs to be in writing. There are Motion forms you can use.
5. The courts will accept filing via Fax; they will need the original papers before court. You can either bring it to the court or Mail it. **NOT IN AN EMAIL FORM.**
6. Anything that is filed or sent to the court **MUST** be served to all parties, with proof of service. **This is the Person(s) filing documents responsibility.**
  - \* We cannot give out anyone's personal information. Such as mailing addresses.
7. The Courts **cannot** Email or Fax any documents or information pertaining to a case
8. **Clerks can only give information to the parties to the case. If you are not listed as a party we cannot release any information to you.**

**\*\*The Court needs to stay Neutral for everyone; we cannot act on behalf of no one. We cannot assume you want something, a case cannot move forward until a request is made from a party.**

*Need assistance filling out forms please feel free to contact the Court Facilitator:  
Emily Obermiller 509-634-2505*

Colville Tribal Court

Address: 38 School Loop Rd, Nespelem, WA 99155 | PO Box 150, Nespelem, WA 99155

Phone: (509) 634-2500 | Fax: (509) 634-2479

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2  
3 **IN THE TRIBAL COURT OF THE**  
4 **COLVILLE CONFEDERATED TRIBES INDIAN RESERVATION**

5  
6 In re the Guardianship of: ) Case No.: \_\_\_\_\_  
7 \_\_\_\_\_ DOB: \_\_\_\_\_ )  
8 \_\_\_\_\_ DOB: \_\_\_\_\_ )  
9 \_\_\_\_\_ DOB: \_\_\_\_\_ )  
10 \_\_\_\_\_ )  
11 \_\_\_\_\_ )  
12 Petitioner, )  
13 vs. \_\_\_\_\_ )  
14 \_\_\_\_\_ )  
15 Respondent )  
16 )  
17 )  
18 )  
19 )  
20 )  
21 )

NOTICE (SUMMONS)

22 **TO THE RESPONDENT(S):**

23 A lawsuit has been filed against you in the above-entitled  
24 court by the Petitioner indicated above. Petitioner's claim is  
25 stated in the written Petition, a copy of which is attached.

In order to defend against this lawsuit, you must answer  
the Petition by stating your defense in writing, and filing it  
with the court and serving a copy of it on the Petitioner herein  
within 20 days after the day you were served this Notice,  
exclusive of the day you were served. If you fail to do this a  
DEFAULT JUDGMENT may be entered against you without further  
notice. A default judgment is one where the Petitioner is  
entitled to what he or she is asking for in the Petition because  
you have not answered the Petition in writing. If you serve a  
Notice of Appearance on the Petitioner, you are entitled to  
notify the other party before a default judgment may be entered.

If you wish to seek the advice of an attorney in this  
matter, you should do so promptly so that your written answer,  
if any, may be served on time.

This Notice (Summons) is issued pursuant to Section 2-2-70  
of the Tribal Law and Order Code.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Petitioner's Name: \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_

IN THE TRIBAL COURT OF THE  
COLVILLE CONFEDERATED TRIBE  
OF INDIAN RESERVATION

IN RE THE GUARDIANSHIP OF:

\_\_\_\_\_, DOB: \_\_\_\_\_  
\_\_\_\_\_, DOB: \_\_\_\_\_  
\_\_\_\_\_, DOB: \_\_\_\_\_  
Alleged Incompetent(s)

CASE NO. \_\_\_\_\_

\_\_\_\_\_  
Petitioner.

PETITION FOR GUARDIANSHIP

Vs.

\_\_\_\_\_  
Respondent

**I. JURISDICTION**

The Colville Tribal Court had jurisdiction over this matter pursuant to Chapter 5-1-180 of the Colville Tribal Law and Order Code.

**II. PETITIONER**

Petitioner in this matter is: \_\_\_\_\_  
currently residing at \_\_\_\_\_  
with a mailing address of: \_\_\_\_\_  
which is/is not on the Colville Indian Reservation.  
Petitioner is/is not a member of the Colville Tribes.

**III. RESPONDENT(s)**

Respondent(s) in this matter is/are: \_\_\_\_\_  
currently residing at: \_\_\_\_\_  
with a mailing address of: \_\_\_\_\_  
which is/is not on the Colville Indian Reservation.  
Respondent is/is not a member of the Colville Tribes.

(IF more than one Respondent, answer for each one.)

**IV. ALLEGATIONS:**

Petitioner is basing the claim in this case on the following facts:

( ) 1. The Petitioner seeks to establish guardianship for the following person(s):  
**NAME AND ADDRESS                      DOB:                      RELATION TO INCOMPETENT(S)**

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( ) 2. There is a general/limited guardian for said alleged incompetent(s) whose name and address is:

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( ) 3. The above-named alleged incompetent(s) do not have general or limited guardian.

( ) 4. A guardian ad litem should be appointed by the Court as required by law.

( ) 5. The Petitioner alleges that he/she is a qualified person to act as guardian of the above-named alleged incompetent(s) because:

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( ) 6. The nature of the alleged incompetency is:

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( ) 7. The estate of the alleged incompetent(s), including both real and personal property, and its value consists of:

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( ) 8. A bond should not be required because the estate is under the value of \$3,000.00

( ) 9. The names, addresses ages and relationships of all the closet blood relatives of the alleged incompetent(s) are:

**NAME AND ADDRESS                                      RELATION                                      DOB/AGE**

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( ) 10. The Petitioner is requesting the guardianship herein for the following reason(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

( ) 11. The following limitations should be placed on the requested guardianship: \_\_\_\_\_  
\_\_\_\_\_

( ) 12. The term of the guardianship should be: \_\_\_\_\_  
\_\_\_\_\_

( ) 13. The following person should be appointed as stand-by guardian, to act in the place of the guardian in his/her absence, until such time as the Petitioner is available or a new guardian is appointed: Names: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**VI. RELIEF REQUESTED**

Based on the above, the Petitioner is asking for the following relief:

( ) 1. That the Petitioner be appointed as full/limited guardian of the person/estate of: \_\_\_\_\_, an alleged incompetent for a term of \_\_\_\_\_, and that Letter of guardianship be issued Letter of Guardianship be issued starting at same.

( ) 2. That \_\_\_\_\_ be appointed as stand-by guardian of said alleged incompetent.

( ) 3. That an Order be entered for the following OTHER RELIEF:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Petitioner's Signature  
SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the state of  
Washington, residing at \_\_\_\_\_,  
My Commission expires: \_\_\_\_\_



8. I have the following monthly expenses and bills:

A. Medical	\$	B. Child Care	\$
C. Transportation	\$	D. Job expenses	\$
E. Fixed Debts	\$	F. Unpaid taxes	\$
G. Other (please state what they are and how much each is):			
			\$
			\$
			\$
TOTAL			\$

9. That I am not able to pay the full amount of the \$30.00 filing fee because: \_\_\_\_\_

10. That if the Court reduces the amount of the filing fee, I feel I would be able to pay \$ \_\_\_\_\_ instead of the full \$30.00.

\_\_\_\_\_  
Signature of Palintiff (Must be signed before a Court official or Notary Public)

Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
( ) Notary ( ) Judge ( ) Clerk

**ORDER**

This matter came before the Court upon a Motion to Reduce or Waive the Filing Fee filed by the Plaintiff in this matter. The Court, after reviewing the record and applicable law in this matter, makes the following determination:

It is ORDERED, ADJUDGED and DECREED that the filing fee in this matter is

( ) waived.

( ) reduced to \$ \_\_\_\_\_.

( ) shall be paid in full before the case will be processed.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Judge

IN THE COURT OF THE  
CONFEDERATED TRIBES OF  
THE COLVILLE RESERVATION

IN RE THE GUARDIANSHIP OF: )  
DOB: \_\_\_\_\_ )  
Alleged Incompetent,

\_\_\_\_\_  
Petitioner(s) )

Vs. )

\_\_\_\_\_  
Respondent(s) )

CASE NO. \_\_\_\_\_

ACKNOWLEDGMENT OF  
PETITION AND WAIVER  
OF NOTICE

I, \_\_\_\_\_, Respondent in the above-entitled matter, do acknowledge:

1. That I received a copy of the Petition for Guardianship regarding the above-mentioned alleged incompetent.
2. That I have read the same and concur with the Petitioner's request for relief; and
3. That I waive notice for any further proceedings in this matter.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Respondent's Signature

Subscribed and Sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public, in and for the  
State of \_\_\_\_\_,  
residing at \_\_\_\_\_  
Expires at \_\_\_\_\_.



**IN THE TRIBAL COURT OF  
THE CONFEDERATED TRIBES OF THE COLVILLE RESERVATION**

_____, <i>Plaintiff/Petitioner,</i>	Case No: _____
vs.	<b>CERTIFICATE OF SERVICE/ ATTEMPTED SERVICE</b>
_____, <i>Defendant/Respondent.</i>	

I, (name): \_\_\_\_\_, hereby certify upon penalty of perjury:

1. I am age 18 or older *and* am not a party to this case.
2. I served court documents for this case to (name): \_\_\_\_\_, whose last known physical address is: \_\_\_\_\_
3. I served/attempted to serve the following documents: (check all that apply, if checking "other" give the title of the document)

<input type="checkbox"/> Petition/Complaint _____		
<input type="checkbox"/> Summons	<input type="checkbox"/> Answer	<input type="checkbox"/> Motion & Affidavit for TRO
<input type="checkbox"/> Motion & Affidavit for Fee Reduction/Waiver	<input type="checkbox"/> Order to Show Cause _____	<input type="checkbox"/> Motion & Affidavit _____
<input type="checkbox"/> Restraining Order	<input type="checkbox"/> Parenting Plan	<input type="checkbox"/> Child Support
<input type="checkbox"/> Temporary Order	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

4.  I successfully gave the documents to the person listed in 2 by:
  - I personally gave the documents to him/her
  - I personally gave the documents to (name): \_\_\_\_\_, a person believed to be age 18 or older and of suitable discretion, who lives at the same address as the person listed in 2.
  - I personally mailed the documents by certified mail, return receipt requested, to the last known address listed below. The return receipt is attached to this Certificate of Service.
- I personally served/mailed the documents on \_\_\_\_\_ at \_\_\_\_\_ am/pm.
- I personally served the documents at/mailed the documents to the following address: \_\_\_\_\_

5.  I was unable to successfully give the documents to the person listed in 2. I attempted to serve him/her on the following dates and locations: (list each date and place you attempted service; you may attach another sheet of paper if needed)

<u>Date</u>	<u>Location</u>	<u>Additional Information</u>

6. I further certify that I have examined the statements made in this document and that the facts contained in it are true and correct to the best of my knowledge.

Signed at (city and state) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Signature of server

\_\_\_\_\_  
Print name of server